

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET  
P.O. BOX 942732  
SACRAMENTO, CA 94234-7320



TO: All County Welfare Directors  
All County Administrative Officers

September 12, 1990  
Letter No.: 90-85

SUBJECT: ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) LIST

Enclosed for your information is an updated list of ACWDLs released between May 1, 1990 and July 31, 1990.

Each quarter we will provide you with an updated listing with the next list scheduled for November 1990.

After reviewing the listings, if you identify letters that you have not received, please contact Michael Guzman of my staff at (916) 322-2715, or send a message via EMC2 to HDMGUZM. When sending a request via EMC2, please include the ACWDL number and appropriate mailing address.

If you have any questions, please contact Michael.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief  
Medi-Cal Eligibility Branch

Enclosure

cc: Medi-Cal Liaisons  
Medi-Cal Program Consultants

Enclosure

1990 ACWD LETTER LIST  
5/1/90 - 7/31/90

<u>LETTER NUMBER</u>	<u>ISSUE DATE</u>	<u>SUBJECT</u>
90-44	4/27	MEDICAL SUPPORT/THIRD PARTY LIABILITY PROGRAM
90-45	5/16	<u>HUNT V. KIZER</u>
90-46	5/22	BUY-IN CHANGE FOR MEDICALLY NEEDY (MN) CASES
90-47	5/24	MODIFICATION OF THE ASSET MATCH OVERPAYMENT REFERRAL PROCEDURE
90-48	6/6	IMPLEMENTATION OF THE QUALIFIED WORKING DISABLED INDIVIDUAL PROGRAM
90-49	6/5	OTHER HEALTH COVERAGE - REPLACEMENT MEDICAL CARDS
90-50	6/12	NOTICE OF ACTION LANGUAGE FOR MEDICARE CATASTROPHIC COVERAGE ACT OF 1988 - SPOUSAL IMPOVERISHMENT APPROVALS AND DENIALS CONCERNING PROPERTY ELIGIBILITY
90-51	6/14	A "THANK YOU" FOR A JOB WELL DONE
90-52	6/7	RECALL OF ACWDL INSTRUCTING COUNTIES TO DENY OR DISCONTINUE AFDC RECIPIENTS TERMINATED DUE TO FAILURE TO PARTICIPATE IN GAIN

90-53	6/7	IMPLEMENTATION OF <u>EDWARDS</u> V. <u>KIZER</u> DATA PROCESSING CHANGES
90-54	6/15	ESTATE RECOVERY PROGRAM - HARDSHIP WAIVERS
90-55	6/15	PERSONS LIVING IN THE HOME
90-56	6/15	CASH BASED MEDI-CAL FOR CHILDREN OF MINOR PARENTS IN FOSTER CARE (SB 510 - INFANT SUPPLEMENT)
90-57	6/22	AID CODE REDESIGN COST BENEFITS ANALYSIS/IMPLEMENTATION PLAN (CBA/IP)
90-58	6/22	STATEWIDE AVERAGE PRIVATE PAY RATE FOR NURSING FACILITY SERVICES
90-59	6/14	<u>LYNCH</u> V. <u>RANK</u> (PICKLE) COORDINATOR MAILING LIST AND THE COUNTY ADDRESS FILE
90-60	6/14	<u>LYNCH</u> V. <u>RANK</u> "PICKLE HANDBOOK"
90-61	6/26	IMPLEMENTATION OF THE 133 PERCENT PROGRAM (SECTION 6401 OF THE OMNIBUS BUDGET RECONCILIATION ACT [OBRA] OF 1989) - DATA PROCESSING CHANGES
90-62	7/2	TREATMENT OF PAYMENTS MADE TO ARMED SERVICES PERSONNEL EXPOSED TO AGENT ORANGE

90-63	7/2	CHANGES IN COPAYMENT FOR MEDICAL SERVICES
90-64	7/2	ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) LIST
90-65	7/3	MEDS NETWORK EQUIPMENT REQUESTS
90-66	6/28	TRANSITIONAL MEDI-CAL (TMC)
90-67	7/6	IRCA/OBRA QUERIES AND POLICY
90-68	7/6	ADVANCE COPY OF MEDI-CAL ELIGIBILITY MANUAL (MEM) PROCEDURES SECTION 7B
90-69	7/12	ERRATA NOTICE - ALL COUNTY WELFARE DIRECTORS LETTER (ACWDL) NO. 90-56  CASH BASED MEDI-CAL FOR CHILDREN OF MINOR PARENTS IN FOSTER CARE
90-70	7/12	OTHER HEALTH COVERAGE
90-71	8/9	CORRECTIONS TO THE QUALIFIED MEDICARE BENEFICIARY INCOME FLOW CHART AND INSTRUCTIONS TO FORMS
90-72	7/25	IMPLEMENTATION OF SAWS I
	6/26	ERRATA TRANSITIONAL MEDI-CAL (TMC)